#### OFFICE OF THE STATE CONTROLLER

#### STATE MANDATED COSTS CLAIMING INSTRUCTIONS NO. 2005-07

### SCHOOL DISTRICT FISCAL ACCOUNTABILITY REPORTING & EMPLOYEE BENEFITS DISCLOSURE

September 30, 2005

In accordance with Government Code (GC) section 17561, eligible claimants may submit claims to the State Controller's Office (SCO) for reimbursement of costs incurred for state mandated cost programs. The following are claiming instructions and forms that eligible claimants will use for the filing of claims for the School District Fiscal Accountability Reporting & Employee Benefits Disclosure program. These claiming instructions are issued subsequent to adoption of the program's Parameters and Guidelines (P's & G's) by the Commission on State Mandates (COSM).

On July 28, 2005, the COSM amended and consolidated the School District Fiscal Accountability Reporting program and Employee Benefits Disclosure program which listed the activities required to comply with the budget process. The activities are: Preparation of the Annual Statement of Receipts & Expenditures, Revision of the Annual Budget, Statement for Negative Fund or Cash Balances, Disapproval of Budgets, Certification of Ability to meet Fiscal Year's Obligations, Statement for Qualified and Negative Certifications, Refusal to Make a Budget, Collective Bargaining Budget Revisions, and Training. These activities are listed in the P's and G's and are included as an integral part of the claiming instructions.

#### **Eligible Claimants**

Any "school district," as defined in Government Code section 17519, except for community colleges, which incurs increased costs as a result of this mandate, is eligible to claim reimbursement.

#### **Filing Deadlines**

#### A. Reimbursement Claims

Initial reimbursement claims must be filed within 120 days from the issuance date of claiming instructions. Reimbursement claims for this amendment begins July 1, 2005. Therefore, estimated claims for fiscal year 2005-06 must be filed on or before **February 6**, **2006**.

Actual reimbursement claim for fiscal year 2005-06 and estimated claim for fiscal year 2006-07 must be filed on or before **January 15, 2007**. In order for a claim to be considered properly filed, it must include any specific supporting documentation requested in the instructions. **Claims filed more than one year after the deadline or without the requested supporting documentation will not be accepted.** 

#### **B.** Late Penalty

#### 1. Initial Claims

AB 3000 enacted into law on September 30, 2002, amended the late penalty assessments on initial claims. Late initial claims submitted **on or after September 30, 2002**, are assessed a late penalty of 10% of the total amount of the initial claims **without limitation**.

#### 2. Annual Reimbursement Claims

All late annual reimbursement claims are assessed a late penalty of 10% subject to the \$1,000 limitation regardless of when the claims were filed.

#### C. Estimated Claims

Unless otherwise specified in the claiming instructions, city, county, city and county, or special district, are not required to provide cost schedules and supporting documents with an estimated claim if the estimated amount does not exceed the previous fiscal year's actual costs by more than 10%. Claimants can simply enter the estimated amount on form FAM-27, line (07).

However, if the estimated claim exceeds the previous fiscal year's actual costs by more than 10%, claimants must complete supplemental claim forms to support their estimated costs as specified for the program to explain the reason for the increased costs. If no explanation supporting the higher estimate is provided with the claim, it will automatically be adjusted to 110% of the previous fiscal year's actual costs. Future estimated claims filed with the SCO must be postmarked by January 15 of the fiscal year in which costs will be incurred. Claims filed timely will be paid before late claims.

#### **Minimum Claim Cost**

GC section 17564(a) provides that no claim shall be filed pursuant to Sections 17551 and 17561, unless such a claim exceeds one thousand dollars (\$1,000).

#### **Reimbursement of Claims**

To be eligible for mandated cost reimbursement for any fiscal year, only actual costs may be claimed. Actual costs are those costs actually incurred to implement the mandated activities. Actual costs must be traceable and supported by source documents that show the validity of such costs, when they were incurred, and their relationship to the reimbursable activities. A source document is a document created at or near the same time the actual cost was incurred for the event or activity in question.

Source documents may include, but are not limited to, employee time records or time logs, signin sheets, invoices, and receipts. Evidence corroborating the source documents may include, but is not limited to, worksheets, cost allocation reports (system generated), purchase orders, contracts, agendas, training packets, and declarations. Evidence corroborating the source documents may include data relevant to the reimbursable activities otherwise in compliance with local, state, and federal government requirements. However, corroborating documents cannot be substituted for source documents.

#### **Certification of Claim**

In accordance with the provisions of Government Code section 17561, an authorized representative of the claimant shall be required to provide a certification of claim stating: "I certify, (or declare), under penalty of perjury under the laws of the State of California that the foregoing is true and correct," and must further comply with the requirements of the Code of Civil Procedure section 2015.5, for those costs mandated by the State and contained herein.

#### **Audit of Costs**

All claims submitted to the SCO are reviewed to determine if costs are related to the mandate, are reasonable and not excessive, and the claim was prepared in accordance with the SCO's claiming instructions and the P's & G's adopted by the Commission. If any adjustments are made to a claim, a "Notice of Claim Adjustment" specifying the claim component adjusted, the amount adjusted, and the reason for the adjustment, will be mailed within 30 days after payment of the claim.

Pursuant to GC section 17558.5, subdivision (a), a reimbursement claim for actual costs filed by a local agency pursuant to this chapter is subject to the initiation of an audit by the SCO no later than three years after the date that the actual reimbursement claim is filed or last amended, whichever is later. However, if no funds are appropriated or no payment is made to a claimant for the program for the fiscal year for which the claim is filed, the time for the SCO to initiate an audit shall commence to run from the date of initial payment of the claim.

In any case, an audit shall be completed not later than two years after the date that the audit is commenced. All documents used to support the reimbursable activities must be retained during the period subject to audit. If an audit has been initiated by the SCO during the period subject to audit, the retention period is extended until the ultimate resolution of any audit findings. On-site audits will be conducted by the SCO as deemed necessary.

#### **Retention of Claiming Instructions**

The claiming instructions and forms in this package should be retained permanently in your Mandated Cost Manual for future reference and use in filing claims. These forms should be duplicated to meet your filing requirements. You will be notified of updated forms or changes to claiming instructions as necessary.

Questions or requests for hard copies of these instructions should be faxed to Ginny Brummels at (916) 323-6527, or e-mailed to **LRSDAR@sco.ca.gov.** Or, if you wish, you may call the Local Reimbursements Section at (916) 324-5729.

For your reference, these and future mandated costs claiming instructions and forms can be found on the Internet at www.sco.ca.gov/ard/local/locreim/index.shtml.

#### **Address for Filing Claims**

Claims should be rounded to the nearest dollar. Submit a signed original and a copy of form FAM-27, Claim for Payment, and all other forms and supporting documents. (To expedite the payment process, please sign the form in blue ink, and attach a copy of the form FAM-27 to the top of the claim package.) Use the following mailing addresses:

If delivered by U.S. Postal Service:

Office of the State Controller Attn: Local Reimbursements Section Division of Accounting and Reporting P.O. Box 942850

Sacramento, CA 94250

If delivered by other delivery services:

Office of the State Controller Attn: Local Reimbursements Section Division of Accounting and Reporting 3301 C Street, Suite 500 Sacramento, CA 95816 Amended: July 28, 2005 Corrected: February 7, 2002 Adopted: January 24, 2002

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#### AMENDED PARAMETERS AND GUIDELINES

#### CONSOLIDATION

School District Fiscal Accountability Reporting (97-TC-19) Education Code Sections 42100, 42127, 42127.5, 42127.6, 42128, 42131,

Government Code Section 3540.2

Statutes 1981, Chapter 100

Statutes 1985, Chapter 185

Statutes 1986, Chapter 1150

Statutes 1987, Chapters 917 and 1452

Statutes 1988, Chapters 1461 and 1462

Statutes 1990, Chapter 525

Statutes 1991, Chapter 1213

Statutes 1992, Chapter 323

Statutes 1993, Chapters 923 and 924

Statutes 1994, Chapters 650 and 1002

Statutes 1995, Chapter 525

Employee Benefits Disclosure (CSM-4502) Education Code Section 42142 Statutes 1994, Chapter 650 (AB 3141)

#### I. SUMMARY OF THE MANDATE

School District Fiscal Accountability Reporting

On October 26, 2000, the Commission on State Mandates (Commission) adopted its Statement of Decision finding that the *School District Fiscal Accountability Reporting* program (Education Code sections 42100, 42127, 42127.5, 42127.6, 42128, and 42131 and Government Code section 3540.2) requires some new activities, as specified below, which constitute new programs or higher levels of service within existing programs upon school districts and/or county offices of education within the meaning of article XIII B, section 6 of the California Constitution and impose costs mandated by the state pursuant to Government Code section 17514.

Accordingly, the Commission approved this test claim for the following specific new activities required to comply with the budget process:

#### **School District Activities:**

- 1. Sending a statement of receipts and expenditures for the preceding fiscal year to the county superintendent of schools, pursuant to Education Code section 42100.
- 2. Adjusting for the change in the deadline for adopting the revised school district budget, from on or before September 15, to on or before September 8, pursuant to Education Code section 42127.
- 3. Making available for public review, not later than 45 days after the Governor signs the annual State Budget Act, any revisions in revenues and expenditures made to the school district budget to reflect the funding made available by that State Budget Act, pursuant to Education Code section 42127.
- 4. Drafting a statement of correction when the school district incurs a negative balance, pursuant to Education Code section 42127.5.
- 5. Certifying in writing, either positively, qualifiedly, or negatively, within 45 days after the close of the period being reported, whether the school district is able to meet its financial obligations for the remainder of the fiscal year and, based on current forecasts, for the subsequent fiscal year, pursuant to Education Code section 42131.
- 6. Filing with the county superintendent of schools a copy of the financial obligation certification, and a copy of the report submitted to the school district governing board required by Education Code section 42130, pursuant to Education Code section 42131.
- 7. For those school districts with a qualified or negative financial certification, providing to the county superintendent of schools, the State Controller, and the State Superintendent of Public Instruction, no later than June 1 each year, financial statement projections of the school district's fund and cash balances through June 30 for the period ending April 30, pursuant to Education Code section 42131.
- 8. For those school districts with a qualified or negative financial certification, providing the county superintendent of schools with all information relevant to the financial impact of any collective bargaining agreement, in the format developed by the State Superintendent of Public Instruction, as specifically requested by the county office of education, pursuant to Government Code section 3540.2.

#### **County Office of Education Activities:**

- 9. Verifying the mathematical accuracy of the school district statement of receipts and expenditures for the preceding fiscal year, pursuant to Education Code section 42100.
- 10. Sending a copy of the verified school district statement of receipts and expenditures for the preceding fiscal year to the State Superintendent of Public Instruction, pursuant to Education Code section 42100.
- 11. Adjusting for the change in deadline for approval of the revised school district budget, from on or before November 1, to on or before October 8, pursuant to Education Code section 42127.
- 12. Providing a list to the State Superintendent of Public Instruction, or before September 22, identifying all school districts for which budgets may be disapproved, pursuant to Education Code section 42127.

- 13. Providing a report to the State Superintendent of Public Instruction, on or before October 8, identifying all school districts for which budgets have been disapproved, including a copy of the written response transmitted to each school district when their budget was disapproved, pursuant to Education Code section 42127.
- 14. Notifying the State Superintendent of Public Instruction in writing if a county superintendent of schools determines that a school district is unable to meet its financial obligations for the current or two subsequent fiscal years, or if the school district has a qualified or negative certification required by section 42131, pursuant to Education Code section 42127.6.
- 15. Notifying appropriate county officials that he or she shall not approve any warrants issued by the school district, whenever a school district has not made a budget or filed the interim reports required by section 42130, pursuant to Education Code section 42128.
- 16. Changing the school district financial certification to negative or qualified, as appropriate, if a county office of education receives a positive certification from the school district, when a negative or qualified certification should have been filed and providing notice of that action to the governing board of the school district and to the State Superintendent of Public Instruction, within 75 days after the close of the applicable reporting period, pursuant to Education Code section 42131.
- 17. Sending copies of any certification in which the governing board is unable to certify unqualifiedly that financial obligations will be met, and a copy of the report submitted to the governing board pursuant to Section 42130 to the State Controller and the State Superintendent of Public Instruction at the time of certification, together with a completed transmittal form provided by the State Superintendent of Public Instruction, pursuant to Education Code section 42131.
- 18. Submitting to the State Superintendent of Public Instruction and the State Controller the county superintendent's comments on those school district financial certifications that are classified as qualified or negative, and reporting any action proposed or taken, within 75 days after the close of the applicable reporting period, pursuant to Education Code section 42131.
- 19. Reporting to the State Controller and State Superintendent of Public Instruction as to whether the governing board of each of the school districts under their jurisdiction has submitted the certification required, and the type of certification filed by each school district, within 75 days after the close of the applicable reporting period, pursuant to Education Code section 42131.

#### Employee Benefits Disclosure

On February 22, 2001, the Commission determined that the *Employee Benefits Disclosure* program (CSM-4502) imposed a reimbursable state mandate on school districts, as follows:

Within 45 days of adopting a collective bargaining agreement, forwarding to the county superintendent of schools any revisions to the school district's current year budget that are necessary to fulfill the terms of that agreement with any additional costs reflected in interim fiscal reports or multiyear fiscal projects. (Ed. Code, § 42142.)

#### II. ELIGIBLE CLAIMANTS

Any "school district," as defined in Government Code section 17519, except for community colleges, which incurs increased costs as a result of this mandate, is eligible to claim reimbursement.

#### III. PERIOD OF REIMBURSEMENT

The period of reimbursement for this amendment begins on July 1, 2005.

Pursuant to Government Code section 17560, reimbursement for state-mandated costs may be claimed as follows:

- 1. A local agency or school district may file an estimated reimbursement claim by January 15 of the fiscal year in which costs are to be incurred, and, by January 15 following that fiscal year shall file an annual reimbursement claim that details the costs actually incurred for that fiscal year; or it may comply with the provisions of subdivision (b).
- 2. A local agency or school district may, by January 15 following the fiscal year in which costs are incurred, file an annual reimbursement claim that details the costs actually incurred for that fiscal year.
- 3. In the event revised claiming instructions are issued by the Controller pursuant to subdivision (c) of section 17558 between October 15 and January 15, a local agency or school district filing an annual reimbursement claim shall have 120 days following the issuance date of the revised claiming instructions to file a claim.

Reimbursable actual costs for one fiscal year shall be included in each claim. Estimated costs for the subsequent year may be included on the same claim, if applicable. Pursuant to Government Code section 17561 (d)(1), all claims for reimbursement of initial years' costs shall be submitted within 120 days of the issuance of the State Controller's claiming instructions. If the total costs for a given fiscal year do not exceed \$1,000, no reimbursement shall be allowed, except as otherwise allowed by Government Code section 17564.

There shall be no reimbursement for any period in which the Legislature has suspended the operation of a mandate pursuant to state law.

#### IV. REIMBURSABLE ACTIVITIES

To be eligible for mandated cost reimbursement for any fiscal year, only actual costs may be claimed. Actual costs are those costs actually incurred to implement the mandated activities. Actual costs must be traceable and supported by source documents that show the validity of such costs, when they were incurred, and their relationship to the reimbursable activities. A source document is a document created at or near the same time the actual cost was incurred for the event or activity in question. Source documents may include, but are not limited to, employee time records or time logs, sign-in sheets, invoices, and receipts.

Evidence corroborating the source documents may include, but is not limited to, worksheets, cost allocation reports (system generated), purchase orders, contracts, agendas, training packets, and declarations. Declarations must include a certification or declaration stating, "I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct," and must further comply with the requirements of Code of Civil Procedure section 2015.5. Evidence corroborating the source documents may include data relevant to the

reimbursable activities otherwise in compliance with local, state, and federal government requirements. However, corroborating documents cannot be substituted for source documents.

The claimant is only allowed to claim and be reimbursed for increased costs for reimbursable activities identified below. Increased cost is limited to the cost of an activity that the claimant is required to incur as a result of the mandate.

For each eligible claimant, the following activities are eligible for reimbursement:

A. Annual Statement of Receipts and Expenditures (Ed. Code, § 42100.)

#### **School District Activities**

• On or before September 15, the governing board of each school district shall file an annual statement of all receipts and expenditures of the school district for the preceding fiscal year with the county superintendent of schools.

#### County Office of Education Activities

- On or before October 15, the county superintendent of schools shall verify the mathematical accuracy of the statement of receipts and expenditures for the preceding fiscal year and shall transmit a copy of the statement to the State Superintendent of Public Instruction.
- B. Revised Annual Budget (Ed. Code, § 42127, subd. (i)(4).)

#### School District Activities

- Amending the policies and procedures to reflect the change in deadline for adopting the revised school district budget from on or before September 15, to on or before September 8. (One-time Activity.)
- Not later than 45 days after the Governor signs the annual Budget Act, the school district shall make available for public review any revisions in revenues and expenditures that it has made to its budget to reflect the funding made available by that Budget Act.

#### County Office of Education Activities

- Amending the policies and procedures to reflect the change in deadline for approval
  of the revised budget from on or before November 1, to on or before October 8.
   (One-time Activity.)
- C. Negative Fund or Cash Balances (Ed. Code, §§ 42127.5, 42127.6.)

#### School District Activities

• The governing board of any school district that reported a negative unrestricted fund balance or a negative cash balance in the annual report required by Education Code section 42127 or in the audited annual financial statements required by Education Code section 42120 shall include with the budget submitted in accordance with Education Code section 42127 and the interim certifications required by Education Code section 35015, a statement that identifies the reasons for the negative unrestricted fund balance or negative cash balance and the steps that have been taken to ensure that the negative balance will not occur at the end of the current fiscal year. (Ed. Code, § 42127.5.)

#### County Office of Education Activities

- If at any time during the fiscal year the county superintendent of schools determines that a school district may be unable to meet its financial obligations for the current or two subsequent fiscal years or if a school district has a qualified certification pursuant to Education Code section 42131, the superintendent shall notify the governing board of the school district and the State Superintendent of Public Instruction in writing of that determination and the basis for the determination. (Ed. Code, § 42127.6, subd. (a).)
- D. Disapproved Budgets (Ed. Code, § 42127, subds. (f) & (h).)

#### County Office of Education Activities

- On or before September 22, the county superintendent of schools shall provide a list to the State Superintendent of Public Instruction identifying all school districts for which budgets may be disapproved. (Ed. Code, § 42127, subd. (f).)
- Not later than October 8, the county superintendent of schools shall submit a report to
  the State Superintendent of Public Instruction identifying all school districts for
  which budgets have been disapproved, including a copy of the written response
  transmitted to each of those school districts pursuant to Education Code section
  42127, subdivision (d). (Ed. Code, § 42127, subd. (h).)
- E. Certification of Ability to Meet Fiscal Year Obligations (Ed. Code, § 42131.) School District Activities
  - Within 45 days after the close of the period being reported, the governing board of each school district shall certify, in writing, whether or not the school district is able to meet its financial obligations for the remainder of the fiscal year and, based on current forecasts, for the subsequent two fiscal years. The certifications shall be classified as positive, qualified, or negative as prescribed by the State Superintendent of Public Instruction, and shall be based on the financial and budgetary reports required by Education Code section 42130 and additional financial information known by the governing board at the time of the certification. (Ed. Code, § 42131, subd. (a)(2).)
  - The school district shall file a copy of each certification and a copy of the financial and budgetary status report submitted pursuant to Education Code section 42130 with the county superintendent of schools (Ed. Code, § 42131, subd. (a)(2).)

#### County Office of Education Activities

- When a county office of education receives a positive certification that a school district is able to meet its financial obligations, the county office of education shall review the positive certification to determine whether a negative or qualified certification should have been filed. (Ed. Code, § 42131, subd. (a)(2).)
- When a county office of education determines that a positive certification should have been filed as a negative or qualified certification, the county superintendent of schools shall change the certification to negative or qualified, as appropriate, and, no

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<sup>&</sup>lt;sup>1</sup> Commonly referred to as multiyear projections.

- later than 75 days after the close of the period being reported, shall provide notice of that action to the governing board of the school district and to the State Superintendent of Public Instruction. (Ed. Code, § 42131, subd. (a)(2).)
- Within 75 days after the close of each reporting period, each county superintendent of schools shall report to the State Controller and the State Superintendent of Public Instruction as to whether the governing board of each school district under his or her jurisdiction has submitted the certification required by Education Code section 42131, subdivision (a). That report shall account for all districts under the jurisdiction of the county office of education and indicate the type of certification filed by each district. (Ed. Code, § 42131, subd. (c).)
- F. Qualified and Negative Certifications (Ed. Code, § 42131, subd. (e), Gov. Code, § 3540.2.)

#### School District Activities

- No later than June 1, the governing board of each school district filing a qualified or negative certification for the second report required under Education Code section 42130, or classified as qualified or negative by the county superintendent of schools, shall provide to the county superintendent of schools, the State Controller, and the State Superintendent of Public Instruction financial statement projections of the district's fund and cash balances through June 30 for the period ending April 30. (Ed. Code, § 42131, subd. (e).)
- A school district with a qualified or negative certification shall provide the county superintendent of schools, upon request, with all information relevant to provide an understanding of the financial impact of any final collective bargaining agreement reached pursuant to Education Code section 3543.2. (Gov. Code, § 3540.2, subd. (d).)

#### County Office of Education Activities

- At the time of the certification, the county office of education shall submit copies of any certification in which the governing board is unable to certify unqualifiedly that these financial obligations will be met and a copy of the financial and budgetary status report submitted to the governing board pursuant to Education Code section 42130 to the State Controller and the State Superintendent of Public Instruction, together with a completed transmittal form provided by the State Superintendent of Public Instruction. (Ed. Code, § 42131, subd. (a)(2).)
- Within 75 days after the close of the reporting period on all school district certifications that are classified as qualified or negative, the county superintendent of schools shall submit to the State Superintendent of Public Instruction and the State Controller his or her comments on those certifications and report any action proposed or taken pursuant to Education Code section 42131, subdivision (b). (Ed. Code, § 42131, subd. (a)(2).)

#### G. Neglect or Refusal to Make a Budget (Ed. Code, § 42128.)

#### County Office of Education Activities

• If the governing board of any school district neglects or refuses to make a school district budget as prescribed by chapter 6, article 2 of the Education Code (beginning with Education Code section 42120), or neglects to file interim financial and budgetary reports pursuant to Education Code section 42130, then the county superintendent of schools shall notify the appropriate county official that he or she shall not approve any warrants issued by the school district.

#### H. Collective Bargaining Budget Revisions

#### **School District Activities**

Within 45 days of adopting a collective bargaining agreement, the superintendent of the school district shall forward to the county superintendent of schools any revisions to the school district's current year budget that are necessary to fulfill the terms of that agreement. Any additional costs to the school district that may result from the terms of the collective bargaining agreement shall be reflected in interim fiscal reports or multiyear fiscal projections. (Ed. Code, § 42142.)

#### I. Training

Train staff on implementing the reimbursable activities listed in section IV, activities A through H, of these parameters and guidelines. (One-time activity for each employee.)

#### V. CLAIM PREPARATION AND SUBMISSION

Each of the following cost elements must be identified for each reimbursable activity identified in Section IV, Reimbursable Activities, of this document. Each claimed reimbursable cost must be supported by source documentation as described in Section IV. Additionally, each reimbursement claim must be filed in a timely manner.

#### A. Direct Cost Reporting

Direct costs are those costs incurred specifically for the reimbursable activities. The following direct costs are eligible for reimbursement.

#### 1. Salaries and Benefits

Report each employee implementing the reimbursable activities by name, job classification, and productive hourly rate (total wages and related benefits divided by productive hours). Describe the specific reimbursable activities performed and the hours devoted to each reimbursable activity performed.

#### 2. Materials and Supplies

Report the cost of materials and supplies that have been consumed or expended for the purpose of the reimbursable activities. Purchases shall be claimed at the actual price after deducting discounts, rebates, and allowances received by the claimant. Supplies that are withdrawn from inventory shall be charged on an appropriate and recognized method of costing, consistently applied.

#### 3. Contracted Services

Report the name of the contractor and services performed to implement the reimbursable activities. Attach a copy of the contract to the claim. If the contractor bills for time and materials, report the number of hours spent on the activities and all costs charged. If the contract is a fixed price, report the dates when services were performed and itemize all costs for those services.

#### 4. Fixed Assets and Equipment

Report the purchase price paid for fixed assets and equipment (including computers) necessary to implement the reimbursable activities. The purchase price includes taxes, delivery costs, and installation costs. If the fixed asset or equipment is also used for purposes other than the reimbursable activities, only the pro-rata portion of the purchase price used to implement the reimbursable activities can be claimed.

#### 5. Travel

Report the name of the employee traveling for the purpose of the reimbursable activities. Include the date of travel, destination point, the specific reimbursable activity requiring travel, and related travel expenses reimbursed to the employee in compliance with the rules of the local jurisdiction. Report employee travel time according to the rules of cost element A.1, Salaries and Benefits, for each applicable reimbursable activity.

#### 6. Training

Report the cost of training an employee to perform the reimbursable activities, as specified in Section IV of this document. Report the name and job classification of each employee preparing for, attending, and/or conducting training necessary to implement the reimbursable activities. Provide the title, subject, and purpose (related to the mandate of the training session), dates attended, and location. If the training encompasses subjects broader than the reimbursable activities, only the pro-rata portion can be claimed. Report employee training time for each applicable reimbursable activity according to the rules of cost element A.1, Salaries and Benefits, and A.2, Materials and Supplies. Report the cost of consultants who conduct the training according to the rules of cost element A.3, Contracted Services.

#### B. Indirect Cost Rates

Indirect costs are costs that have been incurred for common or joint purposes. These costs benefit more than one cost objective and cannot be readily identified with a particular final cost objective without effort disproportionate to the results achieved. After direct costs have been determined and assigned to other activities, as appropriate, indirect costs are those remaining to be allocated to benefited cost objectives. A cost may not be allocated as an indirect cost if any other cost incurred for the same purpose, in like circumstances, has been claimed as a direct cost.

Indirect costs include: (a) the indirect costs originating in each department or agency of the governmental unit carrying out state mandated programs, and (b) the costs of central governmental services distributed through the central service cost allocation plan and not otherwise treated as direct costs.

School districts must use the J-380 (or subsequent replacement) non-restrictive indirect cost rate provisionally approved by the California Department of Education.

County offices of education must use the J-580 (or subsequent replacement) non-restrictive indirect cost rate provisionally approved by the California Department of Education.

#### VI. RECORD RETENTION

Pursuant to Government Code section 17558.5, subdivision (a), a reimbursement claim for actual costs filed by a local agency or school district pursuant to this chapter<sup>2</sup> is subject to the initiation of an audit by the Controller no later than three years after the date that the actual reimbursement claim is filed or last amended, whichever is later. However, if no funds are appropriated or no payment is made to a claimant for the program for the fiscal year for which the claim is filed, the time for the Controller to initiate an audit shall commence to run from the date of initial payment of the claim. In any case, an audit shall be completed not later than two years after the date that the audit is commenced. All documents used to support the reimbursable activities, as described in Section IV, must be retained during the period subject to audit. If an audit has been initiated by the Controller during the period subject to audit, the retention period is extended until the ultimate resolution of any audit findings.

#### VII. OFFSETTING SAVINGS AND REIMBURSEMENTS

Any offsetting savings the claimant experiences in the same program as a result of the same statutes or executive orders found to contain the mandate shall be deducted from the costs claimed. In addition, reimbursement for this mandate from any source, including but not limited to, services fees collected, federal funds, and other state funds, shall be identified and deducted from this claim.

#### VIII. STATE CONTROLLER'S CLAIMING INSTRUCTIONS

Pursuant to Government Code section 17558, subdivision (c), the Controller shall issue revised claiming instructions for each mandate that requires state reimbursement not later than 60 days after receiving the adopted parameters and guidelines from the Commission, to assist local agencies and school districts in claiming costs to be reimbursed. The claiming instructions shall be derived from the test claim decision and the parameters and guidelines adopted by the Commission.

Pursuant to Government Code section 17561, subdivision (d)(1), issuance of the claiming instructions shall constitute a notice of the right of the local agencies and school districts to file reimbursement claims, based upon parameters and guidelines adopted by the Commission.

#### IX. REMEDIES BEFORE THE COMMISSION

Upon request of a local agency or school district, the Commission shall review the claiming instructions issued by the State Controller or any other authorized state agency for reimbursement of mandated costs pursuant to Government Code section 17571. If the Commission determines that the claiming instructions do not conform to the parameters and guidelines, the Commission shall direct the Controller to modify the claiming instructions and the Controller shall modify the claiming instructions to conform to the parameters and guidelines as directed by the Commission.

In addition, requests may be made to amend parameters and guidelines pursuant to Government Code section 17557, subdivision (d), and California Code of Regulations, title 2, section 1183.2.

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<sup>&</sup>lt;sup>2</sup> This refers to Title 2, division 4, part 7, chapter 4 of the Government Code.

#### X. LEGAL AND FACTUAL BASIS FOR THE PARAMETERS AND GUIDELINES

The Statement of Decision is legally binding on all parties and provides the legal and factual basis for the parameters and guidelines. The support for the legal and factual findings is found in the administrative record for the test claim. The administrative record, including the Statement of Decision, is on file with the Commission.

		CLAIM FOR PAYMEN	For State Controller Use Only Program							
	Pursuan	t to Government Code Se	(19) Program Number 0025	3						
		CT FISCAL ACCOUNTAB	(20) Date Filed//_	<b>- 258</b>						
$\perp$		LOYEE BENEFITS DISCL	(21) LRS Input//_							
<u>,</u>	(01) Claimant Identification Nun	nber	Reimbursemen	t Claim Data						
B (	(02) Claimant Name		(22) SFAR & EBD-1, (03)(1)(f)							
L	County of Location			(23) SFAR & EBD-1, (03)(2)(f)						
Εľ	Street Address or P.O. Box		(24) SFAR & EBD-1, (03)(3)(f)							
R E	City	State	Zip Code	(25) SFAR & EBD-1, (03)(4)(f)						
	Type of Claim	Estimated Claim	Reimbursement Claim	(26) SFAR & EBD-1, (03)(5)(f)						
		(03) Estimated	(09) Reimbursement	(27) SFAR & EBD-1, (03)(6)(f)						
		(04) Combined	(10) Combined	(28) SFAR & EBD-1, (03)(7)(f)						
		(05) Amended	(11) Amended	(29) SFAR & EBD-1, (03)(8)(f)						
F	Fiscal Year of Cost	(06) <b>20/20</b>	(12) <b>20/20</b>	(30) SFAR & EBD-1, (03)(9)(f)						
1	Total Claimed Amount	(07)	(13)	(31) SFAR & EBD-1, (05)						
L	Less: 10% Late Penalty,	not to exceed \$1,000	(14)	(32) SFAR & EBD-1, (07)						
L	_ess: Prior Claim Paym	ent Received	(15)	(33) SFAR & EBD-1, (08)						
1	Net Claimed Amount		(16)	(34) SFAR & EBD-1, (09)						
[	Oue from State	(08)	(17)	(35)						
[	Oue to State		(18)	(36)						
(	(37) CERTIFICATION	OF CLAIM								
r F I C	In accordance with the provisions of Government Code Section 17561, I certify that I am the officer authorized by the school district to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Government Code Sections 1090 to 1098, inclusive.  I further certify that there was no application other than from the claimant, nor any grant or payment received, for reimbursement of costs claimed herein, and such costs are for a new program or increased level of services of an existing program. All offsetting savings and reimbursements set forth in the Parameters and Guidelines are identified, and all costs claimed are supported by source documentation									
1	currently maintained by the claimant.  The amounts for this Estimated Claim and/or Reimbursement Claim are hereby claimed from the State for payment of estimated and/or actual costs set forth on the attached statements. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.									
S	Signature of Authorized Offic	cer		Date						
L										
_	ype or Print Name (38) Name of Contact Person for	or Claim		Title						
[	(30) Name of Contact Person IC	oi CiaiiII	Telephone Number	( ) -	Ext.					
			E-Mail Address							

### SCHOOL DISTRICT FISCAL ACCOUNTABILITY REPORTING & EMPLOYEE BENEFITS DISCLOSURE

#### Certification Claim Form Instructions

FORM FAM-27

- (01) Enter the payee number assigned by the State Controller's Office.
- (02) Enter your Official Name, County of Location, Street or P. O. Box address, City, State, and Zip Code.
- (03) If filing an estimated claim, enter an "X" in the box on line (03) Estimated.
- (04) If filing a combined estimated claim on behalf of districts within the county, enter an "X" in the box on line (04) Combined.
- (05) If filing an amended estimated claim, enter an "X" in the box on line (05) Amended.
- (06) Enter the fiscal year in which costs are to be incurred.
- (07) Enter the amount of the estimated claim. If the estimate exceeds the previous year's actual costs by more than 10%, complete form SFAR & EBD -1 and enter the amount from line (10).
- (08) Enter the same amount as shown on line (07).
- (09) If filing a reimbursement claim, enter an "X" in the box on line (09) Reimbursement.
- (10) If filing a combined reimbursement claim on behalf of districts within the county, enter an "X" in the box on line (10) Combined.
- (11) If filing an amended reimbursement claim, enter an "X" in the box on line (11) Amended.
- (12) Enter the fiscal year for which actual costs are being claimed. If actual costs for more than one fiscal year are being claimed, complete a separate form FAM-27 for each fiscal year.
- (13) Enter the amount of the reimbursement claim from form SFAR & EBD -1, line (10). The total claimed amount must exceed \$1,000.
- (14) Reimbursement claims must be filed by January 15 of the following fiscal year in which costs were incurred or the claims shall be reduced by a late penalty. Enter zero if the claim was timely filed, otherwise, enter the product of multiplying line (13) by the factor 0.10 (10% penalty), not to exceed \$1,000.
- (15) If filing a reimbursement claim or an estimated claim was previously filed for the same fiscal year, enter the amount received for the claim. Otherwise, enter a zero.
- (16) Enter the result of subtracting line (14) and line (15) from line (13).
- (17) If line (16), Net Claimed Amount, is positive, enter that amount on line (17), Due from State.
- (18) If line (16), Net Claimed Amount, is negative, enter that amount on line (18), Due to State.
- (19) to (21) Leave blank.
- (22) to (36) Reimbursement Claim Data. Bring forward the cost information as specified on the left-hand column of lines (22) through (36) for the reimbursement claim, e.g., SFAR & EBD -1, (03)(1)(f), means the information is located on form SFAR & EBD -1, line (03)(1), column (f). Enter the information on the same line but in the right-hand column. Cost information should be rounded to the nearest dollar, i.e., no cents. Indirect costs percentage should be shown as a whole number and without the percent symbol, i.e., 7.548% should be shown as 8. Completion of this data block will expedite the payment process.
- (37) Read the statement "Certification of Claim." If it is true, the claim must be dated, signed by the agency's authorized officer, and must include the person's name and title, typed or printed. Claims cannot be paid unless accompanied by an original signed certification. (To expedite the payment process, please sign the form FAM-27 with blue ink, and attach a copy of the form FAM-27 to the top of the claim package.)
- (38) Enter the name, telephone number, and e-mail address of the person to contact if additional information is required.

SUBMIT A SIGNED ORIGINAL, AND A COPY OF FORM FAM-27, WITH ALL OTHER FORMS AND SUPPORTING DOCUMENTS TO:

Address, if delivered by U.S. Postal Service:

OFFICE OF THE STATE CONTROLLER ATTN: Local Reimbursements Section Division of Accounting and Reporting P.O. Box 942850 Sacramento, CA 94250 Address, if delivered by other delivery service:

OFFICE OF THE STATE CONTROLLER ATTN: Local Reimbursements Section Division of Accounting and Reporting 3301 C Street, Suite 500 Sacramento, CA 95816

Progra	am
25	Q
ZJ	O

# **MANDATED COSTS**

258 SCHOOL DISTRICT FISCAL ACCOUNTABILITY REPORTING & EMPLOYEE BENEFITS DISCLOSURE CLAIM SUMMARY								
(01) Claimant			(02) Type of	Fiscal Year				
			Reimbu Estimate	20/20				
Claim Statistics								
Direct Costs			Object A	ccounts				
(03) Reimbursable Components	(a) Salaries and Benefits	(b) Materials and Supplies	(c) Contract Services	(d) Fixed Assets	(e) Travel and Training	(f) Total		
Annual Statement of Receipts & Expenditures								
2. Revised Annual Budget								
Negative Fund or Cash     Balances								
4. Disapproved Budgets								
Certification of Ability to     Meet FY Obligations								
Qualified and Negative     Certifications								
Neglect or Refusal     to Make a Budget								
Collective Bargaining     Budget Revisions								
9. Training								
(04) Total Direct Costs								
Indirect Costs								
(05) Indirect Cost Rate			[From J-380	0 or J-580]		%		
(06) Total Indirect Costs			[Line (04)(a)	x line (05)]				
(07) Total Direct and Indirect Costs [Line (04)(f) + line (06)]								
Cost Reduction								
(08) Less: Offsetting Saving	gs							
(09) Less: Other Reimburse	ements							
(10) Total Claimed Amount [Line (07) - {line (08) + line (09)}]								

## SCHOOL DISTRICT FISCAL ACCOUNTABILITY REPORTING & EMPLOYEE BENEFITS DISCLOSURE CLAIM SUMMARY

FORM SFAR & EBD - 1

Instructions

- (01) Enter the name of the claimant.
- (02) Type of Claim. Check a box, Reimbursement or Estimated, to identify the type of claim being filed. Enter the fiscal year of costs.

Form SFAR & EBD -1 must be filed for a reimbursement claim. Do not complete form SFAR & EBD -1 if you are filing an estimated claim and the estimate does not exceed the previous fiscal year's actual costs by more than 10%. Simply enter the amount of the estimated claim on form FAM-27, line (07). However, if the estimated claim exceeds the previous fiscal year's actual costs by more than 10%, form SFAR & EBD -1 must be completed and a statement attached explaining the increased costs. Without this information the estimated claim will automatically be reduced to 110% of the previous fiscal year's actual costs.

- (03) Reimbursable Components. For each reimbursable component, enter the totals from form SFAR & EBD -2, line (05), columns (d) through (h), to form SFAR & EBD -1, block (03), columns (a) through (e), in the appropriate row. Total each row.
- (04) Total Direct Costs. Total columns (a) through (f).
- (05) Indirect Cost Rate. Enter the indirect cost rate from the Department of Education form J-380 or J-580, as applicable for the fiscal year of costs.
- (06) Total Indirect Costs. Enter the result of multiplying the Indirect Cost Rate, line (05), by the Total Salaries and Benefits, line (04)(a).
- (07) Total Direct and Indirect Costs. Enter the sum of Total Direct Costs, line (04)(f), and Total Indirect Costs, line (06).
- (08) Less: Offsetting Savings. If applicable, enter the total savings experienced by the claimant as a direct result of this mandate. Submit a detailed schedule of savings with the claim.
- (09) Less: Other Reimbursements. If applicable, enter the amount of other reimbursements received from any source including, but not limited to, service fees collected, federal funds, and other state funds, which reimbursed any portion of the mandated cost program. Submit a schedule detailing the reimbursement sources and amounts.
- (10) Total Claimed Amount. From Total Direct and Indirect Costs, line (07), subtract the sum of Offsetting Savings, line (08), and Other Reimbursements, line (09). Enter the remainder on this line and carry the amount forward to form FAM-27, line (07) for the Estimated Claim or line (13) for the Reimbursement Claim.

## MANDATED COSTS SCHOOL DISTRICT FISCAL ACCOUNTABILITY REPORTING & EMPLOYEE BENEFITS DISCLOSURE

**COMPONENT/ACTIVITY COST DETAIL** 

FORM SFAR & EBD -2

Classifications, Functions Performed,								
Annual Statement of Receipts & Expenditures  Revised Annual Budget  Disapproved Budgets  Certification of Ability to Meet Fiscal Year Obligations  Qualified and Negative Certifications  Neglect or Refusal to Make a Budget  Collective Bargaining Budget Revisions  Training  (04) Description of Expenses  (a)  (b)  (c)  (d)  (e)  (f)  (g)  (h)  Hourly  Hours  Rate  Worked  Jord Description of Fixeneses  Or  Or  Repositic Supplies  Revised Annual Budget  Revised Annual Budgets  Disapproved Budgets  Qualified and Negative Certifications  Qualified and Negative Certifications  Qualified and Negative Certifications  Unified and Negative Certifications  Algorithm Supplies  Revised Annual Budget  Disapproved Budgets  Collective Bargaining Budget Revisions  Salaries  Materials  and  Contract  Fixed  Assets  Travel  and  Description of Expenses  Assets  Travel  And  Proposition of Expenses  Assets  Travel  And  Proposition of Expenses  Assets  Travel  And  Proposition of Expenses  Assets  Travel  Proposition of Expenses  Assets  Travel  Proposition of Expenses  Propo	(01) Claimant	(02) Fiscal Year						
Negative Fund or Cash Balances	3) Reimbursable Components: Check only <b>one</b> box per form to identify the component being claimed.							
Certification of Ability to Meet Fiscal Year Obligations  Qualified and Negative Certifications  Neglect or Refusal to Make a Budget  Collective Bargaining Budget Revisions  Training  (04) Description of Expenses  (a) (b) (c) (d) (e) (f) (g) (h)  Employee Names, Job Classifications, Functions Performed, and Description of Expenses  Classifications, Functions Performed, and and and proportions of Expenses  Object Accounts  Travel Assets	Annual Statement of Re	ceipts & Expe	enditures		Revised Ann	nual Budget		
Neglect or Refusal to Make a Budget  Training  (04) Description of Expenses  (a) (b) (c) (d) (e) (f) (g) (h)  Employee Names, Job Classifications, Functions Performed, and Description of Expenses  Classifications, Functions Performed, or or Reposite Supplies Services Assets  Travel Assets	Negative Fund or Cash I	Balances			Disapproved	d Budgets		
Training  (04) Description of Expenses  (a) (b) (c) (d) (e) (f) (g) (h)  Employee Names, Job Classifications, Functions Performed, and Description of Expenses or or or Reposite Supplies Services Assets Training	Certification of Ability to	Meet Fiscal \	Year Obligati	ons	Qualified an	d Negative C	ertifications	
(04) Description of Expenses  (a)  (b)  (c)  (d)  (e)  (f)  (g)  (h)  Employee Names, Job  Classifications, Functions Performed, and Description of Expenses  Or Or Reposite  Classifications of Expenses  Or Or Reposite  Classifications Services  Or Or Reposite  Contract Fixed and and Services  Assets  Travel  Assets  Travel  Assets  Travel  Assets  Travel  Contract Fixed Assets  Travel  Contract Services  Contract Fixed Assets  Travel  Contract Fixed Assets	Neglect or Refusal to Ma	ake a Budget			Collective Ba	argaining Bu	dget Revisio	ns
(a) (b) (c) (d) (e) (f) (g) (h)  Employee Names, Job Classifications, Functions Performed, and Description of Expanses  Or Or Reposite  Classifications of Expanses  Or Or Reposite  Services  Assets  Travel  Assets  Assets  Travel  Assets  Travel  Assets  Travel  Assets  Travel  Assets  Travel  Assets  Travel  Assets	Training							
Employee Names, Job Classifications, Functions Performed, or or Or Reposite Supplies Contract Services Assets Training	(04) Description of Expenses				Ob	ject Accou	nts	
Classifications, Functions Performed, or or Reposite Supplies Services Assets Training	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
	Classifications, Functions Performed,	Rate or	Worked or	and	and			Travel and Training
(05) Total Subtotal Page: of	(05) Total Subtatal	Dogo	of.					

### SCHOOL DISTRICT FISCAL ACCOUNTABILITY REPORTING & EMPLOYEE BENEFITS DISCLOSURE

#### COMPONENT/ACTIVITY COST DETAIL

Instructions

FORM SFAR & EBD - 2

- (01) Claimant. Enter the name of the claimant. If more than one department has incurred costs for this mandate, give the name of each department. A separate form SFAR & EBD -2 should be completed for each department.
- (02) Fiscal Year. Enter the fiscal year for which costs were incurred.
- (03) Reimbursable Components. Check the box which indicates the cost component being claimed. Check only one box per form. A separate form SFAR & EBD -2 shall be prepared for each applicable component.
- Description of Expenses. The following table identifies the type of information required to support reimbursable costs. To detail costs for the component activity box "checked" in block (03), enter the employee names, position titles, a brief description of the activities performed, actual time spent by each employee, productive hourly rates, fringe benefits, supplies used, contract services, travel and training expenses. The descriptions required in column (4)(a) must be of sufficient detail to explain the cost of activities or items being claimed. For audit purposes, all supporting documents must be retained by the claimant for a period of not less than three years after the date the claim was filed or last amended, whichever is later. If no funds were appropriated and no payment was made at the time the claims are filed, the time for the Controller to initiate an audit shall be three years from the date of initial payment of the claim. Such documents shall be made available to the State Controller's Office on request.

Object/ Sub object	Columns								Submit supporting
Accounts	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	documents with the claim
Salaries	Employee Name	Hourly Rate	Hours Worked	Salaries = Hourly Rate x Hours Worked					
Benefits	Title Activities	Benefit Rate		Benefits = Benefit Rate x Salaries					
Materials and Supplies	Description of Supplies Used	Unit Cost	Quantity Used		Cost = Unit Cost x Quantity Used				
Contract Services	Name of Contractor Specific Tasks Performed	Hourly Rate	Hours Worked Inclusive Dates of Service			Cost = Hourly Rate x Hours Worked			Copy of Contract
Fixed Assets	Description of Equipment Purchased	Unit Cost	Usage				Cost = Unit Cost x Usage		
Travel and Training Travel	Purpose of Trip Name and Title Departure and Return Date	Per Diem Rate Mileage Rate Travel Cost	Days Miles Travel Mode					Cost = Rate x Days or Miles or Total Travel Cost	
Training	Employee Name/Title Name of Class		Dates Attended					Registration Fee	

(05) Total line (04), columns (d) through (h) and enter the sum on this line. Check the appropriate box to indicate if the amount is a total or subtotal. If more than one form is needed to detail the component/activity costs, number each page. Enter totals from line (05), columns (d) through (h) to form SFAR & EBD - 1, block (03), columns (a) through (e) in the appropriate row.